PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

TOTAL

ADD'L FEE

OR

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 107104-06 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) FEE **NUMBER FILED NUMBER EXTRA** RATE FEE RATE **FOR** BASIC FEE :395 OR (37 CFR 1.16(a)) TOTAL CLAIMS OR minus 20 =X 5 (37 CFR 1.16(c)) INDEPENDENT CLAIMS OR minus 3 = X \$ (37 CFR 1.16(b)) (37 CFR 1.16(d)) OR MULTIPLE DEPENDENT CLAIM PRESENT OR **TOTAL** * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 3) SMALL ENTITY (Column 2) SMALL ENTITY (Column 1) HIGHEST **CLAIMS PRESENT** ADDI-RATE ADDI-RATE NUMBER REMAINING **TIONAL EXTRA TIONAL PREVIOUSLY** ENDMENT **AFTER** FEE FEE PAID FOR **AMENDMENT** Minus Total OR X \$ (37 CFR 1.16(c)) = Independent Minus (37 CFR 1.16(b)) X S OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS **PRESENT** ADDI-RATE ADDI-**RATE** NUMBER REMAINING **EXTRA** TIONAL **TIONAL PREVIOUSLY AFTER** NDMENT FEE PAID FOR FEE **AMENDMENT** = Minus Total = OR X \$_ (37 CFR 1.16(c)) = Independent Minus AME (37 CFR 1.16(b)) OR X \$_ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ +\$ TOTAL **TOTAL** ADD'L FEE OR ADD'L FEE (Column 3) (Column 1) (Column 2) **CLAIMS** HIGHEST \circ **PRESENT** RATE ADDI-RATE ADDI-NUMBER REMAINING **EXTRA PREVIOUSLY** TIONAL TIONAL ENDMENT AFTER FEE FEE PAID FOR **AMENDMENT** = Minus Total X \$_ OR (37 CFR 1.16(c)) = Independent Minus (37 CFR 1.16(b)) X \$_ X \$_ OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR +\$_ + 5

TOTAL

ADD'L FEE

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the